ant(s):

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Chomik, et al.

Serial No.:

09/639,508

Filed:

August 16, 2000

For:

VENT DISC FOR BABY BOTTLE AND METHOD AND

APPARATUS FOR MANUFACTURE THEREOF

Examiner:

Clark F. Dexter

Art Unit:

3724

Customer No.:

67,519

Confirmation No.:

3194

Attorney Docket No.: 460.1891USV

Mail Stop RCE COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

AMENDMENT TRANSMITTAL

We are enclosing an Amendment accompanied by an RCE in response to the communication dated March 17, 2009 in the above-identified application.

| Petition for extension of time pursuant to 37 C.F.R. §§ 1.136 and 1.137 is hereby |
|-------------------------------------------------------------------------------------------|
| made if, and to the extent, required. The fee for this extension of time is calculated to |
| be \$ to extend the time for filing this response until |

The fee for any change in number of claims has been calculated as shown below.

| | | C | LAIMS AS | AMENDE | D | | |
|---------------------------------|-------------------------------------------|-------------|-----------------------------|--------------|------------------|------------|-----------------|
| | Claims Remaining After Amendment | | High Num Previo Pa | ber ously | Present Extra | Rate | |
| Total Claims | 13 | Minus | 40 | | 0 | x \$52.00 | \$ |
| Independent Claims | 2 | Minus | 4 | | 0 | x \$220.00 | \$ |
| MULT | IPLE DEPENDEN | T CLAIM FEE | | | | | x \$360.00 = \$ |
| TOTAL FEE FOR CLAIM CHANGES | | | | | | \$0.00 | |
| 1/2 FILING FEE FOR SMALL ENTITY | | | | | - | \$N/A | |

| | otal fee for this amendment, includ fee (\$810.00) is calculated to be \$ | ing claim changes, any extension of time 310.00. | and |
|------------|----------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| _ | A check in the amount of \$ | is attached. | |
| commoverpa | onal fees under 37 C.F.R. §§1.16 a nunication or during the entire pend ayment, to Deposit Account No. 0 | norized to charge the fee of \$810.00, and 1.17 which may be required with this dency of the application, or credit any 1-0467. A duplicate copy of this Form is | 5 |
| enclos | | DO MA | |
| | May 15, 2009 | Charles of Carpen | |
| | Date | Charles N.J. Ruggiello | |
| | | Attorney for Applicant(s) | |
| | | Registration No. 28,468 | |
| | - | Ohlandt, Greeley, Ruggiero & Perle, L.I | L.P. |
| | | One Landmark Square, 10 th Floor Stamford, CT 06901-2682 | |
| | | Telephone: (203) 327-4500 | |
| | | Telefax: (203) 327-4300 | |
| | | Telelax. (203) 321-0401 | |
| | CERTIFIC | CATE OF MAILING | |
| POSTA | AL SERVICE AS FIRST CLASS MAIL I | PONDENCE IS BEING DEPOSITED WITH ' N AN ENVELOPE ADDRESSED TO: MAIL ST 450, ALEXANDRIA, YA 22313-1450, ON MAY ' | TOP RCE, |
| | | Dlank of M | |
| | Suzanne Lombardo | 1 1 DYWXV' / | 5/15/09 |
| | NAME | SIGNATURE | DATE |
| | | | |

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| MULTIPLE DEPENDENT CLAIM FEE | | | | | | x \$360.00 = \$ | |
| TOTAL FEE FOR CLAIM CHANGES | | | \$0.00 | | | | |
| 1/2 FILING FEE FOR SMALL ENTITY | | | \$N/A | | | | |

| A check in the amount of \$ is attached. X The Commissioner is hereby authorized to charge the fee of \$ 810.00, any additional fees under 37 C.F.R. §§1.16 and 1.17 which may be required with this communication or during the entire pendency of the application, or credit any overpayment, to Deposit Account No. 01-0467. A duplicate copy of this Form is enclosed. May 15, 2009 Date Charles N.J. Ruggievo Attorney for Applicant(s) Registration No. 28,468 Ohlandt, Greeley, Ruggiero & Perle, L.L.P. One Landmark Square, 10 th Floor Stamford, CT 06901-2682 Telephone: (203) 327-4500 Telefax: (203) 327-6401 CERTIFICATE OF MAILING I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE U.S POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: MAIL STOP RCE COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450, ON MAY 15, 2009. Suzanne Lombardo NAME SIGNATURE SIGNATURE SIGNATURE DATE | The to | tal fee for this amendment, including $(\$810.00)$ is calculated to be $\$810.00$ | ing claim changes, any extension of time 310.00. | and |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|---------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-----------------|
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